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Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	Barbara First Name	First Name
	identification (for example, your driver's license or	Ann Middle Name	Middle Name
	passport).	Smith	
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you	Barbara	
	have used in the last 8 years	First Name A.	First Name
	Include your married or	Middle Name Tresch	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security	xxx - xx - 2 2 7 1	xxx - xx -
	number or federal Individual Taxpayer	OR	OR
	Identification number	9xx - xx -	9xx - xx -

(ITIN)

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Deb	otor 1	Barbara Ann Smith					Case nui	mber (if known)		
			Abo	ut Debtor 1:			Abo	out Debtor 2 (Sp	pouse Only i	n a Joint Case):
4.	and En	nsiness names	V	I have not used ar	ny busines	s names or EINs	s. 🔲	I have not used	d any busines	s names or EINs.
	(EIN) y	cation Numbers ou have used in t 8 years	Busin	ess name			Busi	ness name		
		trade names and	Busin	ess name			Busi	ness name		
	doing b	ousiness as names	Busin	ess name			Busi	ness name		
			EIN				EIN			
			EIN				EIN			
5.	Where	you live					If D	ebtor 2 lives at	a different a	ddress:
			272 4 Numb	4 Skyline Drive per Street			Num	nber Street		
				n Ridge	MO	63049	City		Chaha	ZID Code
			City Jeff	erson	State	ZIP Code	City		State	ZIP Code
			Coun				Cou	nty		
			the c	ur mailing addres one above, fill it in t will send any notion ng address.	here. No	te that the	fron will	ebtor 2's mailin n yours, fill it ir send any notice ress.	n here. Note t	that the court
			548	3 Groveland Ro	ad					
			Numb				Num	ber Street		
			P.O. I	Вох			P.O.	Box		
				eseo	NY	14454				
			City		State	ZIP Code	City		State	ZIP Code
6.		ou are choosing	Ched	ck one:			Che	eck one:		
	this dis	strict to file for optcy		Over the last 180 opetition, I have live than in any other of	ed in this d	-		Over the last 1 petition, I have than in any oth	lived in this o	-
				I have another rea (See 28 U.S.C. §		ain.		I have another (See 28 U.S.C		lain.
Ρ	art 2:	Tell the Court Ab	out Yo	our Bankruptc	y Case					
7.	Bankrı	apter of the		cone: (For a brief on the contract of the cont	•				- ',	for Individuals Filing x.
	are cho under	oosing to file	☑ C	Chapter 7						
				Chapter 11						
				Chapter 12						
			ПО	Chapter 13						

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Debtor 1 Barbara Ann Smith			Case number (if known)								
8.	How you will pay the fee	V	I will pay the entire fee when I file my petit court for more details about how you may pay pay with cash, cashier's check, or money ord behalf, your attorney may pay with a credit ca	y. Typically der. If your	y, if you are pay attorney is sub	ing the fee your mitting your pay	self, you may				
			I need to pay the fee in installments. If you Individuals to Pay The Filing Fee in Installment			and attach the A	application for				
			I request that my fee be waived (You may By law, a judge may, but is not required to, w than 150% of the official poverty line that app fee in installments). If you choose this option Filing Fee Waived (Official Form 103B) and f	aive your for the plies to you must not the place of the	ee, and may do r family size an fill out the App	so only if your i d you are unabl	ncome is less e to pay the				
9.	Have you filed for		No								
	bankruptcy within the last 8 years?		Yes.								
		Dist	trict EDMO Ch.13 Discharged		07/14/2010 MM / DD / YYYY	Case number	10-47918				
		Dist	rict	When	MM / DD / VVVV	Case number					
		Dist	rict			Case number					
10.	Are any bankruptcy	$\overline{\mathbf{V}}$	No		, ,						
	cases pending or being filed by a spouse who is		Yes.								
	not filing this case with you, or by a business	Deb	otor		Relationsh	ip to you					
	partner, or by an	Dist	rict	When							
	affiliate?				MM / DD / YYYY	if known					
		Deb	otor		Relationsh	ip to you					
		Dist	rict	When							
				I	MM / DD / YYYY	if known					
11.	Do you rent your residence?		No. Go to line 12.Yes. Has your landlord obtained an eviction	n judgment	against you?						
			No. Go to line 12.Yes. Fill out Initial Statement Aboand file it as part of this bankrupt		tion Judgment	Against You (Fo	orm 101A)				

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Deb	tor 1	Barbara Ann Smith				Cas	se number (if known) _		
Pa	art 3:	Report About Ar	у Ві	usine	sses You Own as a	a Sole Proprieto	or		
12.	-	u a sole proprietor full- or part-time ss?			Go to Part 4. Name and location of b	ousiness			
	busines individu separat	•			Name of business, if any Number Street				
	separate legal entity such as a corporation, partnership, or LLC.								
	If you have more than one sole proprietorship, use a separate sheet and attach it				City Check the appropriate	e box to describe you	State ur business:	ZIP Co	ode
	to this p	Cuton.			Single Asset Rea Stockbroker (as of	al Estate (as defined defined in 11 U.S.C. er (as defined in 11	- ' ''	3))	
13.	13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>		car mo:	set ap st rece	filing under Chapter 11, propriate deadlines. If y nt balance sheet, statem t these documents do no	you indicate that you nent of operations, o	u are a small business cash-flow statement, an	debtor, you d federal ir	u must attach your ncome tax return
	debtor	?	$ \overline{\mathbf{V}} $	No.	I am not filing under C	hapter 11.			
		efinition of small		No.	I am filing under Chap the Bankruptcy Code.	ter 11, but I am NO	Γ a small business deb	tor accordin	ng to the definition in
	11 U.S.	C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	ter 11 and I am a sn	nall business debtor ac	cording to	the definition in the
P	art 4:	Report If You Ov	vn o	r Hav	e Any Hazardous I	Property or Any	Property That Ne	eds Imn	nediate Attention
14.	propert alleged immine	own or have any by that poses or is to pose a threat of ent and identifiable		No Yes.	What is the hazard?				
	safety?	to public health or Or do you own operty that needs ate attention?			If immediate attention	is needed, why is it	needed?		
	perisha livestoc	mple, do you own ble goods, or k that must be fed, or ng that needs urgent			Where is the property?	? Number Street			
						City		State	ZIP Code
						,			0000

Debtor 1 Barbara Ann Smith Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

ji am not	require	ea to rec	eive a briefing	about
credit co	ounselii	ng becau	ıse of:	

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 B		Barbara Ann Smith						Case number (if	know	n)
P	art 6:	Answer These Q	uest	ions f	for F	Reporting P	urpos	ses		
16.	What ki have?	nd of debts do you	16a.		incurr No.	•	ridual pr o.	sumer debts? Consumer de imarily for a personal, family,		ure defined in 11 U.S.C. § 101(8) usehold purpose."
			16b.		ney fo No.	-	or invest c.	iness debts? Business deb ment or through the operation		e debts that you incurred to obtain e business or investment.
			16c.	Stat	e the	type of debts	you owe	e that are not consumer or bu	sines	s debts.
17.	Are you Chapte	ı filing under r 7?		No.	I am	not filing unde	er Chap	ter 7. Go to line 18.		
	any exe exclude adminis are paid availab	estimate that after empt property is ed and strative expenses d that funds will be le for distribution cured creditors?	V	Yes.		•		•	-	exempt property is excluded and to distribute to unsecured creditors?
18.		any creditors do imate that you		1-49 50-99 100-1 200-9	99			1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you e your assets to h?		\$100,	01-\$1 ,001-\$	00,000 5500,000 1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you e your liabilities to		\$100,	01-\$1 ,001-\$	00,000 500,000 1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

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Debtor 1	Barbara Ann Smith		Case number (if known)
Part 7:	Sign Below		
For you		I have examined this petition, and I declare used and correct.	inder penalty of perjury that the information provided is true
		·	aware that I may proceed, if eligible, under Chapter 7, 11, 12, stand the relief available under each chapter, and I choose to
		If no attorney represents me and I did not par fill out this document, I have obtained and re	y or agree to pay someone who is not an attorney to help me ad the notice required by 11 U.S.C. § 342(b).
		I request relief in accordance with the chapte	r of title 11, United States Code, specified in this petition.
		•	ealing property, or obtaining money or property by fraud in in fines up to \$250,000, or imprisonment for up to 20 years, 3571.
		X /s/ Barbara Ann Smith Barbara Ann Smith, Debtor 1	Signature of Debtor 2
		Executed on 02/11/2020	Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1	Barbara Ann Smith		Case number (if know	n)	
represente	not represented by y, you do not need	I, the attorney for the debtor(s) named in this eligibility to proceed under Chapter 7, 11, 12 relief available under each chapter for which the debtor(s) the notice required by 11 U.S.C certify that I have no knowledge after an inquis incorrect.	tes Code, and have explained occrtify that I have delivered which § 707(b)(4)(D) applies	ed the I to	
		X /s/ Randall T. Oettle Signature of Attorney for Debtor	Date	02/11/2020 MM / DD / YYYY	
		Randall T. Oettle Printed name R.O.C. Law, Randall Oettle Compa Firm Name 12964 Tesson Ferry, Suite B Number Street	ny, P.C.		
		St. Louis City	MO State	63128 ZIP Code	
		Contact phone (314) 843-0220	Email address		
		46820		_	
		Bar number	State		

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Debtor 1	Barbara	Ann	Smith		
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Bar	nkruptcy Court for	the: EASTERN DIS	STRICT OF MISSOURI	_	
Case number				Chock	if this is an
(if known)				_	ded filing
Official Form	106A/R				
		•			12/4/
Schedule A/	B: Property	/			12/1
Part 1: Des	scribe Each R	esidence, Buildi	ing, Land, or Other Rea	al Estate You Own or Have	e an Interest In
. Do you own o	or have any legal o Part 2.	or equitable interes	ing, Land, or Other Rea		e an Interest In
. Do you own o No. Go to Yes. Wh 1.	or have any legal o Part 2. ere is the property	or equitable interes y? What is to the check all	the property?	g, land, or similar property? Do not deduct secured clai amount of any secured cla	ims or exemptions. Put thims on Schedule D:
. Do you own o No. Go to Yes. Wh	or have any legal o Part 2. ere is the property	y? What is to Check all ition Single Duple	et in any residence, building	g, land, or similar property? Do not deduct secured clai	ims or exemptions. Put thims on Schedule D:
. Do you own o No. Go to Yes. Wh 1. 2724 Skyline Dri Street address, if availa	or have any legal of Part 2. ere is the property ve able, or other description MO 636	y? What is to Check all Single Duple Cond	the property? I that apply. Ide-family home ex or multi-unit building	p, land, or similar property? Do not deduct secured claid amount of any secured claid Creditors Who Have Claim Current value of the	ims or exemptions. Put th ims on <i>Schedule D:</i> as Secured by Property. Current value of the
. Do you own o No. Go to Yes. Wh 1. 2724 Skyline Dri Street address, if availa High Ridge City Jefferson	or have any legal of Part 2. ere is the property ve able, or other description MO 638	y? What is to Check all Single Cond Manual Code Investigation Investiga	the property? I that apply. Ide-family home ex or multi-unit building dominium or cooperative ufactured or mobile home Idestment property eshare	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim Current value of the entire property?	ims or exemptions. Put the ims on Schedule D: as Secured by Property. Current value of the portion you own? \$125,000.00 our ownership ple, tenancy by the
. Do you own o No. Go to Yes. Wh 1. 2724 Skyline Dri Street address, if availa	or have any legal of Part 2. ere is the property ve able, or other description MO 636	what is to Check all Cond Cond Code Code Cother Cot	the property? I that apply. Ide-family home ex or multi-unit building dominium or cooperative ufactured or mobile home I stment property	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim Current value of the entire property? \$125,000.00 Describe the nature of your interest (such as fee simple entireties, or a life estate)	ims or exemptions. Put the ims on Schedule D: as Secured by Property. Current value of the portion you own? \$125,000.00 our ownership ple, tenancy by the
No. Go to Yes. Wh 1. 2724 Skyline Dri Street address, if availate High Ridge County Residence	or have any legal of Part 2. Here is the property ove the property of the prop	what is to Check all Cond Cond Code Code Cother Cot	the property? I that apply. Ide-family home ex or multi-unit building dominium or cooperative ufactured or mobile home I stment property eshare or	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim Current value of the entire property? \$125,000.00 Describe the nature of your interest (such as fee simple entireties, or a life estate)	ims or exemptions. Put the ims on Schedule D: as Secured by Property. Current value of the portion you own? \$125,000.00 our ownership ple, tenancy by the
. Do you own o No. Go to Yes. Wh 1. 2724 Skyline Dri Street address, if availa High Ridge City Defferson County	or have any legal of Part 2. Here is the property ove able, or other description of State ZIP	or equitable interes y? What is to Check all Check all Duple Cond Land Inves Times Other Who has Check on Debto Debto	the property? I that apply. Ide-family home ex or multi-unit building dominium or cooperative ufactured or mobile home I stment property eshare or	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim Current value of the entire property? \$125,000.00 Describe the nature of your interest (such as fee simple entireties, or a life estate) Residence Check if this is comme (see instructions)	ims or exemptions. Put the ims on Schedule D: as Secured by Property. Current value of the portion you own? \$125,000.00 our ownership ple, tenancy by the limits of the portion with the portion in the portion with the portion

Official Form 106A/B Schedule A/B: Property page 1

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Debtor 1	Barbara	Ann Smith	Cas	se number (if known)	
Part 2	Descr	ibe Your Vehicles			
-		•	ole interest in any vehicles, whether they are see a vehicle, also report it on Schedule G: Exec	_	•
		ks, tractors, sport utili	ty vehicles, motorcycles		
	No Yes				
3.1. Make:		Kia	Who has an interest in the property? Check one.	Do not deduct secured clair amount of any secured clair	ms on <i>Schedule D:</i>
Model:		Sorento	Debtor 1 only	Creditors Who Have Claims	
Year:		2015	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Approxim	nate mileage:	128,000	At least one of the debtors and another	\$7,000.00	\$7,000.00
Other info 2015 Kia miles)		approx. 128,000	Check if this is community property (see instructions)		
3.2. Make:		Ford	Who has an interest in the property? Check one.	Do not deduct secured clair amount of any secured clair	ms on Schedule D:
Model:		F150	Debtor 1 only	Current value of the	Secured by Property. Current value of the
Year:		1981	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	portion you own?
Approxim	nate mileage:	200,000	At least one of the debtors and another	\$200.00	\$200.00
Other info 1981 Fo miles)		prox. 200,000	Check if this is community property (see instructions)		
	states that t y inoperabl	this automobile is e.			
			s and other recreational vehicles, other veh nal watercraft, fishing vessels, snowmobiles, n		
	No Yes				
		•	own for all of your entries from Part 2, incl or Part 2. Write that number here	_	\$7,200.00
Part 3	Descr	ibe Your Persona	and Household Items	•	
Do you o	own or have a	any legal or equitable	interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	_	s and furnishings appliances, furniture, li	nens, china, kitchenware		
	No Yes. Describ	e Four bedroom	, two bathroom, partially finished basen	nent residence.	\$500.00
		Debtor owns a	oes her household goods and furnishing twin size box springs and mattress, or kitchen table and chairs, including one r	ne dresser, one	

Official Form 106A/B Schedule A/B: Property page 2

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Debt	or 1 Barbara Ani	n Smith Case number (if known)	
7.	music colle	s and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; ections; electronic devices including cell phones, cameras, media players, games	
	☐ No ☑ Yes. Describe	One television and one cellular device.	\$100.00
8.		and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; in, or baseball card collections; other collections, memorabilia, collectibles	
	Yes. Describe		
9.	canoes and	otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; id kayaks; carpentry tools; musical instruments	
	Yes. Describe		
10.	Firearms Examples: Pistols, rifle ✓ No ✓ Yes. Describe	les, shotguns, ammunition, and related equipment	\neg
11.	Clothes	clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No	wear, sheet, decision decision wear, sheet, decessiones	
	Yes. Describe	Debtor describes her wearing apparel as average quantity and average quality.	\$100.00
12.	Jewelry <i>Examples:</i> Everyday j gold, silver	jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gen r	ns,
	No✓ Yes. Describe	Costume jewelry.	\$100.00
13.	Non-farm animals Examples: Dogs, cats	s, birds, horses	
	Yes. Describe		
14.	Any other personal a did not list	and household items you did not already list, including any health aids you	_
	✓ No Yes. Give specific information		
15.		of all of your entries from Part 3, including any entries for pages you have Write the number here"	\$800.00
Pa		Your Financial Assets	

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

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Deb	otor 1 Barbara Ann Smith	th Case number (if known)			
16.	Cash Examples: Money you have in you petition	wallet, in your home, in a safe deposit box, and on hand when you file your			
	□ No ☑ Yes	Cash:	\$50.00		
17.		ther financial accounts; certificates of deposit; shares in credit unions, other similar institutions. If you have multiple accounts with the same			
	□ No ☑ Yes	Institution name:			
	17.1. Checking account:	Farmers and Merchants Bank - Checking Account	\$10.00		
	17.2. Checking account:	Community Bank - Checking Account	\$1.00		
	17.3. Savings account:	Farmers and Merchants Bank - Savings Account	\$1.00		
18.	☑ No	accounts with brokerage firms, money market accounts			
	Yes Institut				
19.	Non-publicly traded stock and in an interest in an LLC, partnership	erests in incorporated and unincorporated businesses, including , and joint venture			
	✓ No Yes. Give specific information about them	of entity: % of ownership:			
20.	Negotiable instruments include per	and other negotiable and non-negotiable instruments conal checks, cashiers' checks, promissory notes, and money orders. Se you cannot transfer to someone by signing or delivering them.			
	No Yes. Give specific information about them Issuer	name:			
21.	Retirement or pension accounts Examples: Interests in IRA, ERISA profit-sharing plans	Keogh, 401(k), 403(b), thrift savings accounts, or other pension or			
	No ✓ Yes. List each account separately. Type of	account: Institution name:			
	Pension	plan: Debtor has a pension through District 9 and receives \$143.43 before tax deductions each month.	\$1,721.16		
22.		ou have made so that you may continue service or use from a company dos, prepaid rent, public utilities (electric, gas, water), telecommunications			
	✓ No☐ Yes	Institution name or individual:			

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Deb	tor 1 Barbara Ann Smith	Case number (if known)		
23.	Annuities (A contract for a specific ✓ No	c periodic payment of money to you, either for life or for a numb	er of yea	rs)	
	Yes Issuer	name and description:			
24.	Interests in an education IRA, in a 26 U.S.C. §§ 530(b)(1), 529A(b), ar	an account in a qualified ABLE program, or under a qualified and $529(b)(1)$.	d state tu	uition pro	gram.
	✓ No ☐ YesInstitut	ion name and description. Separately file the records of any int	erests. 1	1 U.S.C.	§ 521(c)
25.	powers exercisable for your bene	sts in property (other than anything listed in line 1), and righ efit	ts or		
	✓ No Yes. Give specific information about them				
26.	Examples: Internet domain names,	trade secrets, and other intellectual property; , websites, proceeds from royalties and licensing agreements			
	✓ No Yes. Give specific information about them				
27.	Licenses, franchises, and other g Examples: Building permits, exclusi	general intangibles sive licenses, cooperative association holdings, liquor licenses,	professio	onal licens	ses
	✓ No				
	Yes. Give specific information about them				
Mor	ney or property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you				
	□ No			E. dend	#0.00
	Yes. Give specific information about them, including whether	Federal: Debtor believes she last filed tax returns fo tax year of 2012. In addition, the Debtor states that	I	Federal:	
	you already filed the returns	exempt from filing tax returns due to insufficient inc		State:	\$0.00
	and the tax years	Amt: \$0.00		Local:	\$0.00
29.	Family support Examples: Past due or lump sum a	alimony, spousal support, child support, maintenance, divorce so	ettlement	t, property	settlement
	No		limanı.		
	Yes. Give specific information		limony:		
			laintenan	ice:	
			upport:		
		P	roperty s	ettlement	<u> </u>
30.	compensation, Social S	ou y insurance payments, disability benefits, sick pay, vacation pay Security benefits; unpaid loans you made to someone else	, workers	s'	
	✓ No ☐ Yes. Give specific information				

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Deb	tor 1 Barbara Ann Smith			Case number (if known) _	
31.	Interests in insurance policies Examples: Health, disability, or life ✓ No	insurance; health savings	s account (HSA); credi	t, homeowner's, or renter's i	nsurance
	Yes. Name the insurance company of each policy and list its value	ompany name:	Be	neficiary:	Surrender or refund value:
32.	Any interest in property that is du If you are the beneficiary of a living entitled to receive property because	trust, expect proceeds fro		icy, or are currently	
	✓ No✓ Yes. Give specific information				
33.	Claims against third parties, when Examples: Accidents, employment	=		demand for payment	
	✓ No ☐ Yes. Describe each claim				
34.	Other contingent and unliquidated rights to set off claims	d claims of every nature	, including countercla	aims of the debtor and	
	☐ No ☐ Yes. Describe each claim	compensation, prop financial malpractice employment or discr to recover monetary retains the right to a	erty damage, exposed e/malfeasance, class rimination claim, on ssum from a secon ssert any such clai ngly, in the event s	personal injury, worke sure, legal, medical or as action claim, any other potential rig d or third party. Debtor im and amend her/his uch claim is discovered	ht
35.	Any financial assets you did not a	lready list			
	✓ No✓ Yes. Give specific information				
36.	Add the dollar value of all of your attached for Part 4. Write that nu				\$1,783.16
Pa	art 5: Describe Any Busines	ss-Related Property	You Own or Hav	e an Interest In. List	any real estate in Part 1
37.	Do you own or have any legal or e	equitable interest in any	business-related pro	pperty?	
	✓ No. Go to Part 6. ☐ Yes. Go to line 38.				
					Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissi	ons you already earned			, ,
	✓ No ☐ Yes. Describe				

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Deb	tor 1 Barbara An	n Smith	Case number (if known)	
39.	Office equipment, fur Examples: Business- desks, cha			
	✓ No ☐ Yes. Describe			
40.	Machinery, fixtures,	equipment, supplies you use in business,	and tools of your trade	
	✓ No ☐ Yes. Describe			
41.	Inventory			
	✓ No Yes. Describe			
42.	Interests in partnersh	nips or joint ventures		
	✓ No ☐ Yes. Describe		% of ownership:	
43.		ng lists, or other compilations		
	□ No	s include personally identifiable informati	on (as defined in 11 U.S.C. § 101(41A))?	1
	Yes. De	escribe		
44.	Any business-related	I property you did not already list		•
	✓ No✓ Yes. Give specific	c information.		
45.		of all of your entries from Part 5, including Write that number here		\$0.00
Pa		ny Farm- and Commercial Fishing r have an interest in farmland, list it ir	-Related Property You Own or Have an Part 1.	n Interest In.
46.	Do you own or have	any legal or equitable interest in any farm	or commercial fishing-related property?	
	No. Go to Part 7. Yes. Go to line 47	7 .		
				Current value of the portion you own? Do not deduct secured claims or exemptions.
47.		poultry, farm-raised fish		
	✓ No ☐ Yes			
48.	Cropseither growin	g or harvested		•
	☑ No			1
	Yes. Give specific information			

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Debt	Dr 1 Barbara Ann Smith	Case number (if known)
49.	Farm and fishing equipment, implements, machinery, fixtures	s, and tools of trade
	▼ No Yes	
50.	Farm and fishing supplies, chemicals, and feed	
	▼ No □ Yes	
51.	Any farm- and commercial fishing-related property you did no	ot already list
	✓ No ✓ Yes. Give specific information	
	Add the dollar value of all of your entries from Part 6, including attached for Part 6. Write that number here	
Pa	rt 7: Describe All Property You Own or Have an I	nterest in That You Did Not List Above
	Do you have other property of any kind you did not already li Examples: Season tickets, country club membership	st?
	✓ No✓ Yes. Give specific information.	
54.	Add the dollar value of all of your entries from Part 7. Write t	hat number here
Pa	rt 8: List the Totals of Each Part of this Form	
55.	Part 1: Total real estate, line 2	→ \$125,000.00
56.	Part 2: Total vehicles, line 5	\$7,200.00
57.	Part 3: Total personal and household items, line 15	\$800.00
58.	Part 4: Total financial assets, line 36	<u>\$1,783.16</u>
59.	Part 5: Total business-related property, line 45	<u>\$0.00</u>
60.	Part 6: Total farm- and fishing-related property, line 52	<u>\$0.00</u>
61.	Part 7: Total other property not listed, line 54	+\$0.00
62.	Total personal property. Add lines 56 through 61	\$9,783.16 Copy personal property total → + \$9,783.16
63.	Total of all property on Schedule A/B. Add line 55 + line 62.	\$134,783.16

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Fill to this in	· · · · · · · · · · · · · · · · · · ·					
Debtor 1	Ormation to in Barbara First Name	Ann Middle Name	Smith			
Debtor 2 (Spouse, if filing)	- First Name	Middle Name				
1			Last Name N DISTRICT OF MI	ടടറ	IIRI	_
Case number	inkruptcy Court to	ruic. <u>LAGILIU</u>	V DIOTRIOT OF WIL	<u> </u>	<u>oiti</u>	Check if this is an amended filing
(if known)						· ·
Official Form	106C					
Schedule C	: The Prope	erty You Cl	aim as Exemp	ot		04/19
Using the property space is needed, f write your name ar	you listed on <i>Scl</i> ill out and attach t nd case number (i	nedule A/B: Prop to this page as m f known).	erty (Official Form 100 any copies of Part 2	6A/B) 2: Ad	as your source, list th ditional Page as nece	esponsible for supplying correct information. e property that you claim as exempt. If more essary. On the top of any additional pages,
is to state a speci exempted up to the receive certain be exemption of 100 property is deterr	ific dollar amoun he amount of any enefits, and tax-e % of fair market mined to exceed	t as exempt. Al applicable stat xempt retirement value under a la that amount, yo	ternatively, you may utory limit. Some ex nt fundsmay be unl w that limits the exe ur exemption would	clair cemp imite mpti	n the full fair market tionssuch as those d in dollar amount. I	you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an lar amount and the value of the le statutory amount.
Part 1: Ide	entity the Prop	Derty You Cla	im as Exempt			
	exemptions are	-	•		if your spouse is filing	with you.
لكا	-		kruptcy exemptions. J.S.C. § 522(b)(2)	11 U.	S.C. § 522(b)(3)	
_	_			nnt f	ill in the information	helow
Brief description			Current value of	-	ount of the	Specific laws that allow exemption
Schedule A/B tha			the portion you own		mption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		eck only one box for h exemption	
Brief description:			\$125,000.00	$\overline{\mathbf{Q}}$	\$0.00	Mo. Rev. Stat. § 513.475
Residence	ilvo				100% of fair market	
2724 Skyline Dr High Ridge, MO					value, up to any applicable statutory	
Line from Schedul					limit	
Brief description:			\$7,000.00	V	\$0.00	Mo. Rev. Stat. § 513.430.1(5)
2015 Kia Sorent Line from <i>Schedul</i>		,000 miles)			100% of fair market value, up to any applicable statutory limit	
-	_	-	more than \$170,350° rears after that for cas		ed on or after the date	of adjustment.)
		property covered	by the exemption wit	hin 1	215 days before you f	iled this case?

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Debtor 1 Barbara Ann Smith		Case number (if known)					
Part 2: Additional Page							
Brief description of the property and line Schedule A/B that lists this property	on Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption				
	Copy the value from Schedule A/B	Check only one box for each exemption					
Brief description: 1981 Ford F150 (approx. 200,000 mil	•	\$200.00 100% of fair market value, up to any	Mo. Rev. Stat. § 513.430.1(5)				
Debtor states that this automobile is currently inoperable. Line from Schedule A/B: 3.2		applicable statutory limit					
Brief description: Four bedroom, two bathroom, partia finished basement residence.	\$500.00 Ily	\$500.00 100% of fair market value, up to any applicable statutory	Mo. Rev. Stat. § 513.430.1(1)				
Debtor describes her household god and furnishings as very minimal. The Debtor owns a twin size box springs mattress, one dresser, one nightstarkitchen table and chairs, including orefrigerator. Line from Schedule A/B: 6	ne s and nd, a	limit					
Brief description: One television and one cellular device Line from Schedule A/B:	\$100.00 ce.	\$100.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(1)				
Brief description: Debtor describes her wearing apparaverage quantity and average quality Line from Schedule A/B: 11		\$100.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(1)				
Brief description: Costume jewelry. Line from Schedule A/B:12	<u>\$100.00</u>	\$100.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(2)				
Brief description: Cash on person. Line from Schedule A/B:16	<u>\$50.00</u>	\$50.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(3)				
Brief description: Farmers and Merchants Bank - Check Account Line from Schedule A/B: 17.1	\$10.00 cking	\$10.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(3)				
Brief description: Farmers and Merchants Bank - Savin Account Line from Schedule A/B: 17.3	\$1.00 ngs	\$1.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(3)				

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Debtor 1 Barbara Ann Smith	Case number (if known)					
Part 2: Additional Page						
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption			
	Copy the value from Schedule A/B	Check only one box for each exemption				
Brief description: Community Bank - Checking Account Line from Schedule A/B:	\$1.00	\$1.00 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(3)			
Debtor has a pension through District 9 and receives \$143.43 before tax deductions each month. Line from Schedule A/B: 21	\$1,721.16	\$1,721.16 100% of fair market value, up to any applicable statutory limit	Mo. Rev. Stat. § 513.430.1(10)(e)			

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			-				
Fill in this info	ormation to Barbara	identify your case Ann	Smith				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bar	nkruptcy Court fo	or the: EASTERN DIS	TRICT OF MISSOL	JRI			
Case number							
(if known)					Check if this is amended filing		
Official Form	106D						
		Who Have Cla	ims Secured	by Property		12/15	
				ogether, both are equal			
1. Do any credit No. Chee Yes. Fill Part 1: Lis 2. List all secure claim, list the coreditor has a much as poss	No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims						
2.1		Describe the secures the	property that	\$1,908.00	\$500.00	\$1,408.00	
Heights Finance Creditor's name 7707 Knoxville A Number Street	•	Household Furnishing	Goods and				
Peoria City Who owes the det ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and D ☐ At least one of ☐ Check if this c to a communit	Debtor 2 only the debtors and	Continge Unliquida Disputed Nature of lie An agree Statutory Judgmen	nt ated n. Check all that appenent you made (such all lien (such as tax lien at lien from a lawsuit cluding a right to offse	n as mortgage or secured , mechanic's lien)	l car Ioan)		
Date debt was inc	urred <u>04/201</u>	9 Last 4 digits	of account number	5 1 0 1			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$1,908.00

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s this portion If any	Value of collateral Unsecure that supports this portion
000.00 \$40,095.67	
	<u>\$125,000.00</u> <u>\$40,0</u>
	car loan)
000.00	\$125,000.00
	car loan)
	car loan)

Add the dollar value of your entries in Column A on this page. Write that number here:

\$165,295.67

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Debtor 1 Barbara Ann Smith	Case number (if known)				
Part 1: Additional Page After listing any entries on sequentially from the previous		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
Wells Fargo Dealer Svc Creditor's name Po Box 10709 Number Street Raleigh NC 27605 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Describe the property that secures the claim: 2015 Kia Sorento As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, medulus Judgment lien from a lawsuit Other (including a right to offset) Automobile	mortgage or secured	\$7,000.00 car loan)	\$4,975.00	
Check if this claim relates to a community debt	Automobile				
Date debt was incurred 12/2015	Last 4 digits of account number	5 1 7 3			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$11,975.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$179,178.67

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Em to distance		la dif								
Fill in this inf	ormation to i	dentify your c	ase:							
Debtor 1	Barbara	Ann	Smith		-					
	First Name	Middle Name	Last Nan	ne						
Debtor 2	=				-					
(Spouse, if filing)	First Name	Middle Name	Last Nan	ne						
United States Ba	nkruptcy Court fo	the: EASTERN	DISTRICT OF	MISSOURI	-					
Case number (if known)									Check if this is a amended filing	an
Official Form	106E/F									
Schedule E/	F: Creditor	s Who Have	e Unsecure	d Claims						12/15
on Schedule A/B: Do not include an If more space is n to this page. On t Part 1: Lis	y creditors with needed, copy the the top of any ad	partially secured Part you need, fi	claims that are ill it out, number rite your name a	listed in <i>Schedu</i> the entries in the and case number	le D: C e boxe	<i>redit</i> d s on t	ors V	Vho H	old Claims Secur	ed by Property.
1. Do any credit	tors have priority	unsecured clair	ns against you?							
No. Go to Yes. 2. List all of you		u red claims . If a	creditor has more	e than one priority	unsec	ured o	claim	list th	ne creditor separat	tely for each
claim. For ea show both pric more space is	ch claim listed, id ority and nonprior	entify what type of ty amounts. As m ty unsecured clair	f claim it is. If a c nuch as possible,	laim has both pric	ority and	d non etical	priori orde	ty am	ounts, list that clair ording to the creditor one creditor holds a	m here and or's name. If
(For an explar	nation of each typ	e of claim, see the	e instructions for t	this form in the ins	structio	n boo	klet.			
(i oi aii oxpiai	nation of odon typ	o or olaim, ooo in				Total		n	Priority amount	Nonpriority amount
2.1						Uı	nkno	own	Unknown	Unknown
Jefferson Count			Last 4 digits of	account number		_				
Priority Creditor's Nam Collector of Rev			•			0				
Number Street	renue		when was the	debt incurred?	2019				_	
P.O. Box 100			As of the date	ou file, the clain	n is: C	heck	all th	at app	oly.	
			Contingent							
Hillsboro	MO	63050	Unliquidated Disputed	d						
City	State	ZIP Code	ш .							
Who incurred the	debt? Check	one.	• •	ITY unsecured c						
Debtor 1 only Debtor 2 only			- 브 ㅜ	upport obligations certain other debts		we th	A (10)	/ernm	<u>ont</u>	
Debtor 1 and D	•			leath or personal					One	
ш	the debtors and		intoxicated			,				
ш	claim is for a con	nmunity debt	Other. Spe	cify						
Is the claim subje	ct to offset?									
✓ No Yes										

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Debtor 1	Barbara Ann Smith	Case number (if known)	
Part 2	List All of Your NONPRIORIT	Y Unsecured Claims	
3. Do a	any creditors have nonpriority unsecured	claims against you?	
	No. You have nothing to report in this part. Yes	Submit this form to the court with your other schedules.	
If a c	creditor has more than one nonpriority unsect of claim it is. Do not list claims already incl	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim lister uded in Part 1. If more than one creditor holds a particular claim, list the ot unsecured claims, fill out the Continuation Page of Part 2.	
4.1			\$437.00
Comeni	ty Bank/beallsfl	Last 4 digits of account number 0 5 4 3	·
Nonpriority Po Box	Creditor's Name	When was the debt incurred? 03/2018	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		Unliquidated	
Columb	us OH 43218	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	urred the debt? Check one. or 1 only	Student loans	
<u> </u>	or 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	or 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
_	ast one of the debtors and another	Other. Specify	
_	k if this claim is for a community debt	Charge Account	
	im subject to offset?		
✓ No ☐ Yes			
4.2			\$461.00
Credit O	ne Bank Na	Last 4 digits of account number 8 5 1 5	· ·
Nonpriority Po Box	Creditor's Name	When was the debt incurred? 11/2017	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		Unliquidated	
Las Veg	as NV 89193	Disputed	
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	urred the debt? Check one. or 1 only	Student loans	
	or 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	or 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
_	ast one of the debtors and another	✓ Other. Specify	
☐ Chec	k if this claim is for a community debt	Credit Card	
	im subject to offset?		
✓ No ☐ Yes			

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Debtor 1 Barbara Ann Smith	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.3		\$2,548.00
DDS Dentures + Implant Solutions	Last 4 digits of account number 1 8 4 5	
Nonpriority Creditor's Name 1708 Missouri State Road	When was the debt incurred? 2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
Annual MO C2040	Disputed	
Arnold MO 63010 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt Is the claim subject to offset?	Dental Services	
No No		
Yes		
4.4		\$236.83
Gateway Cardiology, P.C.	Last 4 digits of account number 2 2 7 1	
Nonpriority Creditor's Name PO Box 505036	When was the debt incurred? 2012	
Number Street	As of the date you file, the claim is: Check all that apply.	
-	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
St. Louis MO 63160	Disputed	
St. Louis MO 63160 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Medical Services	
☑ No		
Yes		
4.5		\$1,936.12
Hometowne Capital	Last 4 digits of account number 1 0 1 9	
Nonpriority Creditor's Name P.O. Box 100201	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
Nashville TN 37224	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim is for a community debt	☑ Other. Specify	
Is the claim subject to offset?	Lease to Purchase	
No No		
T Yes		

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Debtor 1 Barbara Ann Smith	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.6		\$900.56
Jefferson County Collector	Last 4 digits of account number 1 0 5 5	
Nonpriority Creditor's Name Collector of Revenue	When was the debt incurred? 2017-2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
P.O. Box 100	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Hillsboro MO 63050		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Personal Property Taxes	
Is the claim subject to offset?	r ersonari roperty raxes	
☑ No		
Yes		
4.7		\$6,704.42
The Hartford	Last 4 digits of account number 2 0 4 9	φ0,704.42
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Hartford CT 06115		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations origing out of a constration agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Insurance Services	
Is the claim subject to offset?	insurance services	
No No		
Yes		
4.8		¢400.00
URMC Highland Hospital	Last 4 digits of account number 2 2 7 1	\$100.00
Nonpriority Creditor's Name	When was the debt incurred? 2018	
1000 South Avenue Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Rochester NY 14620	Disputed	
City State ZIP Code Who incurred the debt? Check one	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim is for a community debt	Other. Specify	
Check if this claim is for a community debt	Medical Services	
Is the claim subject to offset? No		
Yes		

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Debtor 1	Barbara Ann	Smith			Case	number (if known)
Part 3:	List Others	to Be	Notified Abou	t a Debt That You Already	y Lis	sted
For ex credit debts	cample, if a collect or in Parts 1 or 2, that you listed in	tion ag then li Parts	ency is trying to o st the collection a	collect from you for a debt you o gency here. Similarly, if you ha tional creditors here. If you do	owe t	bt that you already listed in Parts 1 or 2. to someone else, list the original nore than one creditor for any of the have additional parties to be notified for
CBCS				On which entry in Part 1 or P	Part 2	did you list the original creditor?
Name P.O. Box	2724			Line of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street			Collecting for URMC Highland Hospital		Part 2: Creditors with Nonpriority Unsecured Claims
				 Last 4 digits of account num 	ber	8 4 6 4
Columbus	S	OH	43216	_		
City		State	ZIP Code			
IRS Name				On which entry in Part 1 or P	Part 2	did you list the original creditor?
P.O. Box	7346 Street			Line of (Check one): Federal Income Taxes		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Philadelp	hia	PA State	19101-7346 ZIP Code	Last 4 digits of account num	ber	2 2 7 1
	Department of F	Reven	ue	On which entry in Part 1 or F	Part 2	did you list the original creditor?
P.O. Box	475301			Line of (Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number West High	Street			Missouri Income Taxes	_	Part 2: Creditors with Nonpriority Unsecured Claims
Jefferson City	City	MO State	65105-0475 ZIP Code	Last 4 digits of account num	ber	2 2 7 1
Receivab	le Management	Servi	ces, LLC	On which entry in Part 1 or P	Part 2	did you list the original creditor?
P.O. Box				Lineof (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street			Collecting for Hartford Life BMS Atlanta		Part 2: Creditors with Nonpriority Unsecured Claims
				 Last 4 digits of account num 	ber	<u>6 7 1 9</u>
Minneapo City	olis	MN State	55419 ZIP Code	_		
US Attorn	ey's Office			On which entry in Part 1 or P	Part 2	did you list the original creditor?
	n 10th Street			of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Suite 330	Street 0					Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account num	ber	2 2 7 1
St. Louis		MO	63102	_		
City		State	ZIP Code			

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Debtor 1	Barbara Ann Smith	Case number (if known)
Part 4:	Add the Amounts for Each Type of Unsecured Claim	

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
nom r art i	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	^{6d.} +	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} +	\$13,323.93
	6j.	Total. Add lines 6f through 6i.	6j.	\$13,323.93

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Fill in this inf	ormation to i	dentify your case	:	
Debtor 1	Barbara First Name	Ann Middle Name	Smith Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court fo	r the: EASTERN DIS	TRICT OF MISSOURI	
Case number (if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
 is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
 executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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F	ill in this info	ormation to i	dentify your case	:		
D	ebtor 1	Barbara	Ann	Smith		
_		First Name	Middle Name	Last Name	_	
l D	ebtor 2					
(S	spouse, if filing)	First Name	Middle Name	Last Name	_	
	nitad Statas Bar	oleruptov Court fe	or that EASTEDN DIS	TRICT OF MISSOURI		
	illeu States Dai	ikiupicy Count it	or the. EASTERN DIS	TRICT OF WII33OURI	-	
	ase number				☐ Check if this is an	
(11	known)				amended filing	
						
∩f	ficial Form	106H				
Sc	hedule H:	Your Cod	ebtors			12/
ра <u>с</u> 1.		of any Addition		ame and case number (if kr	nown). Answer every question. Duse as a codebtor.)	
2.		•	•		ory? (Community property states and territories exas, Washington, and Wisconsin.)	
	No. Go to Yes. Did No Yes		rmer spouse, or legal e	quivalent live with you at the	time?	
3.	In Column 1, person show creditor on S	n in line 2 agair chedule D (Offi	as a codebtor only if	that person is a guarantor dule E/F (Official Form 106	ebtor if your spouse is filing with you. List the or cosigner. Make sure you have listed the E/F), or <i>Schedule G</i> (Official Form 106G). Use	

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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F	ill in this inform	ation to i	dentify your case:				
	Debtor 1	Barbara	Ann	Smith			
		First Name	Middle Name	Last Name		Che	ck if this is:
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		— -	An amended filing
	United States Bankri	untcy Court	for the: EASTERN D	ISTRICT OF MIS	SOURI		A supplement showing postpetition
	Case number	aptoy court	<u> </u>				chapter 13 income as of the following date:
	(if known)				_		MM / DD / YYYY
0	fficial Form 10	<u>6l</u>					
S	chedule I: You	ur Incor	ne				12/15
res inc ab yo	sponsible for supply clude information ab out your spouse. If ur name and case n	ring correct out your sp more space	information. If you are pouse. If you are separ e is needed, attach a se nown). Answer every o	married and not ated and your spo parate sheet to the	filing jointly ouse is not f	, and your iling with y	I Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write
1.	Fill in your employ	yment					
	information. If you have more the	nan one		Debtor 1			Debtor 2 or non-filing spouse
	job, attach a separ		Employment status	☐ Employed	1		Employed
	with information ab additional employe			✓ Not employ	ed		■ Not employed
	Include new time of		Occupation	Retired			
	Include part-time, s or self-employed w		Employer's name				
	Occupation may in	clude	Employer's address				
	student or homema applies.	aker, if it		Number Street			Number Street
	аррост						
				City	State	Zip Code	City State Zip Code
			How long employed ti	nere? 7 Years	5		
						_	
ŀ	Part 2: Give D	etails Ab	out Monthly Incom	e			
	timate monthly inco			n. If you have noth	ing to report	for any line	, write \$0 in the space. Include your
lf y	ou or your non-filing	spouse have	e more than one employ	er, combine the inf	ormation for	all employe	rs for that person on the lines below. If
yo	u need more space, a	attach a sep	arate sheet to this form.				
					For D	ebtor 1	For Debtor 2 or non-filing spouse
2.			alary, and commissions I monthly, calculate what		2	\$0.00	
3.	Estimate and list	monthly ov	ertime pay.		3. +	\$0.00	
4.	Calculate gross ir	ncome. Ad	d line 2 + line 3.		4.	\$0.00	

Official Form 106l Schedule I: Your Income page 1

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Debi	Barbara Ann Smith		Case nui	nbe	er (if knov	vn)		
			For Debtor 1		For Debte		9	
	Copy line 4 here	4.	\$0.00	-		-	_	
5.	List all payroll deductions:							
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00					
	5b. Mandatory contributions for retirement plans	5b.	\$0.00					
	5c. Voluntary contributions for retirement plans	5c.	\$0.00					
	5d. Required repayments of retirement fund loans	5d.	\$0.00					
	5e. Insurance	5e.	\$0.00					
	5f. Domestic support obligations	5f.	\$0.00					
	5g. Union dues	5g.	\$0.00					
	5h. Other deductions. Specify:	5h. -	\$0.00					
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$0.00					
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00					
8.	List all other income regularly received:							
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00					
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.							
	8b. Interest and dividends	8b.	\$0.00					
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00					
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.							
	8d. Unemployment compensation	8d.	\$0.00					
	8e. Social Security	8e.	\$2,239.50					
	8f. Other government assistance that you regularly receive							
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
	Specify:	8f.	\$0.00					
	8g. Pension or retirement income	– 8g.	\$143.43					
	8h. Other monthly income. Specify:	8h. .	· ·					
•	· · ·	_ '		Γ			1	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$2,382.93	L] 1	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,382.93	+]=[\$2,382.93
11.	State all other regular contributions to the expenses that you list in a Include contributions from an unmarried partner, members of your house friends or relatives.	hold, y	our dependents, you					
	Do not include any amounts already included in lines 2-10 or amounts the	at are r	not available to pay	exp	enses lis		ched	
	Specify:					_ 11.	+	\$0.00
	Add the amount in the last column of line 10 to the amount in line 11 income. Write that amount on the Summary of Your Assets and Liabilitie if it applies.					12.		\$2,382.93 Combined monthly income
13.	Do you expect an increase or decrease within the year after you file	this fo	rm?					
	No.✓ Yes. Explain:None.Debtor does not consent to paying unsecure	ed, no	n-priority debts v	vith	her So	cial Se	curi	ty benefits.

Official Form 106l Schedule I: Your Income page 2

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F	ill in this inform	ation to identif	y your case:			Cha	ck if this	io	
	Debtor 1	Barbara First Name	Ann Middle Name	Smith Last Na			An ame	ended filing	postpotition
	Debtor 2						chapter	lement showing 13 expenses a	
	(Spouse, if filing)	First Name	Middle Name	Last Na	me		followin	g date:	
	United States Bankr	uptcy Court for the:	EASTERN DIST	RICT OF I	MISSOURI		MM / D	D / YYYY	
	Case number (if known)								
Of	fficial Form 10	<u>6J</u>							
Sc	chedule J: Yo	ur Expenses	8						12/15
cor	rrect information. If me and case number	more space is ne	eded, attach anothe ver every question.	er sheet to t	ing together, both ar his form. On the top				
1.	Is this a joint case	e?							
2.	No	ebtor 2 live in a se	No	2, Expenses	s for Separate Housel				Does dependent
	Do not list Debtor Debtor 2.	1 and	Yes. Fill out this inf for each dependent.		Dependent's relation Debtor 1 or Debtor		———	Dependent's age	live with you?
	Do not state the de names.	ependents'							Yes No Yes No Yes No No Yes Yes No No No No No No
3.	Do your expenses expenses of peop yourself and your	le other than	✓ No ☐ Yes						- ∏ Yes
E	Part 2: Estima	nte Your Ongoin	ng Monthly Exp	enses					
Est to i	timate your expens	es as of your bank of a date after the	ruptcy filing date u	nless you a	re using this form as supplemental Sche			-	
	lude expenses paid th assistance and h		•	•				Your expens	ses
4.			nses for your residany rent for the grour				2	4	
	If not included in	line 4:							
	4a. Real estate ta	axes					2	1a	
	4b. Property, hon	neowner's, or renter	s insurance				4	4b	
	4c. Home mainte	nance, repair, and ι	ıpkeep expenses				2	4c	
	4d Homeowner's	association or con	dominium dues				,	1d	

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Debtor 1	Barbara Ann Smith	Case number (if known)			
		Your expense	s		
5. Add	itional mortgage payments for your residence, such as home equity loans	5.			
6. Utili	ties:				
6a.	Electricity, heat, natural gas	6a.			
6b.	Water, sewer, garbage collection	6b			
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c			
6d.	Other. Specify: Cellular Services	6d.	\$216.00		
7. Foo	d and housekeeping supplies	7.	\$250.00		
8. Chil	dcare and children's education costs	8.			
9. Clot	hing, laundry, and dry cleaning	9.	\$50.00		
10. Pers	sonal care products and services	10.	\$100.00		
11. Med	ical and dental expenses	11.	\$100.00		
	nsportation. Include gas, maintenance, bus or train Do not include car payments.	12.	\$250.00		
	ertainment, clubs, recreation, newspapers, azines, and books	13.	\$100.00		
14. Cha	ritable contributions and religious donations	14.	\$100.00		
15. Insu	rance. not include insurance deducted from your pay or included in lines 4 or 20.				
15a.		15a.			
15b.		15b.			
15c.		15c.	\$118.00		
15d.		15d.	\$149.50		
16. Taxe	Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	, , , , , ,		
17. Insta	allment or lease payments:				
17a.	Car payments for Vehicle 1 2015 Kia Sorento	17a	\$428.00		
17b.	Car payments for Vehicle 2	17b.			
17c.	Other. Specify:				
17d.	Other. Specify:				
	r payments of alimony, maintenance, and support that you did not report as ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.			
19. Othe	er payments you make to support others who do not live with you. cify:	19.			

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Deb	tor 1	Barbara Ann Smith	Case number (if known)				
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.						
	20a.	Mortgages on other property	20a.					
	20b.	Real estate taxes	20b.					
	20c.	Property, homeowner's, or renter's insurance	20c.					
	20d.	Maintenance, repair, and upkeep expenses	20d.					
	20e.	Homeowner's association or condominium dues	20e.					
21.	Other	Specify:	21. +					
22.	Calcu	Calculate your monthly expenses.						
	22a.	Add lines 4 through 21.	22a.	\$1,861.50				
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.					
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$1,861.50				
23.	Calculate your monthly net income.							
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$2,382.93				
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$1,861.50				
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$521.43				
24.	Do yo	ou expect an increase or decrease in your expenses within the year after yo	ou file this form?					
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?							
	1	No.						
		Yes. Explain here:						
		1.5						

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			3 3 3 6 6			
Fill in this	information to	dentify your case):	1		
Debtor 1	Barbara	Ann	Smith	•		
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if fili	ng) First Name	Middle Name	Last Name			
		or the: EASTERN DI	STRICT OF MISSOURI			
Case number (if known)						
Official Fo	rm 106Sum					
ummary	of Your Ass	ets and Liabili	ties and Certain Stat	tistical Information	12/1	
orrect informa chedules afte	ation. Fill out all of	your schedules first inal forms, you must	ied people are filing together, ; then complete the informatic fill out a new Summary and cl	on on this form. If you are filing	ng amended	
ent i.	Julimarize 100	ii Addeta				
					Your assets Value of what you owr	
Schedule /	A/B: Property (Offici	al Form 106A/B)			value of what you owl	
1а. Сору	line 55, Total real e	state, from Schedule A	√B		\$125,000.0	
1h Conv	line CO. Total name	nal proporty from Cab	edule A/B		\$9,783.10	
ть. Сору	ilile 62, Total perso	nai property, irom Sch	edule A/b			
1с. Сору	line 63, Total of all	property on Schedule A	A/B		\$134,783.16	
Part 2:	Summarize You	ır Liabilities				
					Your liabilities Amount you owe	
			Property (Official Form 106D) of claim, at the bottom of the last	page of Part 1 of Schedule D	\$179,178.6	
			ns (Official Form 106E/F) ured claims) from line 6e of Sch	redule E/F	\$0.00	
3b. Copy	the total claims from	n Part 2 (nonpriority un	secured claims) from line 6j of 9	Schedule E/F	+\$13,323.9	
				Your total liabilities	\$192,502.60	
					_	
Part 3:	Summarize You	ır Income and Exp	oenses			
	l: Your Income (Offic				\$2,382.93	
Canus	combined monthly i	ncome from line 12 of	Schedule I		⊅∠,30∠.9 .	

Schedule J: Your Expenses (Official Form 106J)

\$1,861.50

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Deb	otor 1	Barbara Ann Smith	Case number (if known)				
Part 4: Answer These Questions for Administrative and Statistical Records							
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?						
	ш.	 You have nothing to report on this part of the form. Check this box and ses 	submit this form to the court with your other schedules.				
7.	What k	kind of debt do you have?					
	ك	our debts are primarily consumer debts. Consumer debts are those "incumily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for stati					
		our debts are not primarily consumer debts. You have nothing to report of is form to the court with your other schedules.	on this part of the form. Check this box and submit				
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$143.43						
9.	Copy t	he following special categories of claims from Part 4, line 6 of Schedul	ile E/F:				
			Total claim				
	From I	Part 4 on Schedule E/F, copy the following:					
	9a. D	omestic support obligations. (Copy line 6a.)	\$0.00				
	9b. Ta	axes and certain other debts you owe the government. (Copy line 6b.)	\$0.00				
	9c. C	laims for death or personal injury while you were intoxicated. (Copy line 6c.)	.) \$0.00				
	9d. S	tudent loans. (Copy line 6f.)	\$0.00				
		bligations arising out of a separation agreement or divorce that you did not r iority claims. (Copy line 6g.)	report as \$0.00				

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

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			. 9 00 0. 00	
Fill in this inf	ormation to i	dentify your case		
Debtor 1	Barbara First Name	Ann Middle Name	Smith Last Name	_
Debtor 2	First Name	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	-
United States Bar	nkruptcy Court fo	r the: EASTERN DIS	TRICT OF MISSOURI	-
Case number (if known)				Check if this is an amended filing
Official Form	106Dec			
Declaration	About an I	ndividual Debt	or's Schedules	12/1
	ın Below	to 20 years, or bear.	18 U.S.C. §§ 152, 1341, 1519	, and so
Did you pay o	or agree to pay s	someone who is NOT	an attorney to help you fill o	out bankruptcy forms?
☑ No				
Yes. Na	ame of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalt true and corr		eclare that I have read	the summary and schedule	s filed with this declaration and that they are
X /s/ Barba	ra Ann Smith		X	

Signature of Debtor 2

MM / DD / YYYY

Date

Barbara Ann Smith, Debtor 1

MM / DD / YYYY

Date 02/11/2020

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F	ill in this inf	ormation to i	dentify your case:	:		
D	ebtor 1	Barbara First Name	Ann Middle Name	Smith Last Name		
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		
	-		or the: EASTERN DIS	TRICT OF MISSOUR	<u>ı </u>	
_	ase number known)				☐ Check if this is an amended filing	
Of	ficial Form	107				
_			Affairs for Ind	ividuals Filing f	or Bankruptcy	04/
P	art 1: Giv	e Details Ab	out Your Marital S	tatus and Where Y	ou Lived Before	
1.	What is your ☐ Married ☑ Not marrie	current marital	status?			
2.	☑ No			ther than where you live		
3.	(Community p		•	• .	t in a community property state or territory? Louisiana, Nevada, New Mexico, Puerto Rico, Texas,	
	☑ No □ Yes. Mak	e sure vou fill ou	t Schedule H: Your Co	debtors (Official Form 10)6H).	

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Del	otor 1	Barbara Ann Smith		Case nu	mber (if known)	
P	art 2:	Explain the Sources of	Your Income			
4. Did you have any income from employme Fill in the total amount of income you receiv If you are filing a joint case and you have in		e total amount of income you rec	eived from all jobs and all b	ousinesses, including par	t-time activities.	calendar years?
	✓ No	s. Fill in the details.				
5.	Include unempl	a receive any other income duri income regardless of whether the oyment; and other public benefit mbling and lottery winnings. If yo 1.	at income is taxable. Exam payments; pensions; rental	ples of other income are income; interest; dividen	ds; money collected from	lawsuits; royalties;
	List ead	ch source and the gross income for	rom each source separately	. Do not include income	that you listed in line 4.	
	□ No ☑ Yes	s. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions
Fro	m Janua	ry 1 of the current year until	Social Security	\$2,090.00		
		i filed for bankruptcy:	Pension	\$286.86		
For	the last	calendar year:	Social Security	\$26,874.00		
		December 31, <u>2019</u>)	Pension	\$1,721.16		
Ea:	the cala	ndar your hoforo that	Social Security	\$26,874.00		
		ndar year before that: December 31, 2018)	Pension	\$1,721.16		

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Debtor 1	Barbara Ann Smith		Case number (if known)							
Part 3:	List Certain Payments You	List Certain Payments You Made Before You Filed for Bankruptcy								
6. Are ei	ither Debtor 1's or Debtor 2's debts pr	imarily consume	r debts?							
□ No		Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."								
	During the 90 days before you filed	for bankruptcy, di	d you pay any credit	or a total of \$6,825*	or more?					
	No. Go to line 7.									
	total amount you paid that	Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.								
	* Subject to adjustment on 4/01/22	and every 3 years	after that for cases	filed on or after the	date of adjustment.					
√ Y∈	es. Debtor 1 or Debtor 2 or both have primarily consumer debts.									
	During the 90 days before you filed	for bankruptcy, di	d you pay any credit	or a total of \$600 or	more?					
	No. Go to line 7.	☐ No. Go to line 7.								
	Yes. List below each creditor to creditor. Do not include p Also, do not include paym	ayments for dome	stic support obligation	ons, such as child su						
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for					
	go Dealer Svc		\$856.00	\$11,975.00	_ Mortgage					
Creditor's name Po Box 10709 Number Street		Debtor pa	Debtor paid \$856.00 in January of 2020.		✓ Car☐ Credit card☐ Loan repayment☐ Suppliers or vendors					
Raleigh City	NC 27605 State ZIP Code				Other					
7. Within Inside corpor agent, such a	n 1 year before you filed for bankruptours include your relatives; any general parations of which you are an officer, direct, including one for a business you operates child support and alimony.	ortners; relatives of tor, person in cont	f any general partne rol, or owner of 20%	rs; partnerships of w or more of their voti	hich you are a general partner; ng securities; and any managing					

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Deb	otor 1	Barbara Ann Smith	Case number (if known)	
8.		1 year before you filed for bankruptcy, did you make any payn ed an insider?	nents or transfer any property on account of a debt that	
	Include	payments on debts guaranteed or cosigned by an insider.		
	✓ No ☐ Yes	s. List all payments that benefited an insider.		
Р	art 4:	Identify Legal Actions, Repossessions, and Fore	eclosures	
9.	List all s	1 year before you filed for bankruptcy, were you a party in any such matters, including personal injury cases, small claims actions ations, and contract disputes.	· · · · · · · · · · · · · · · · · · ·	
	✓ No ☐ Yes	s. Fill in the details.		
10.	seized,	1 year before you filed for bankruptcy, was any of your proper or levied? all that apply and fill in the details below.	rty repossessed, foreclosed, garnished, attached,	
		. Go to line 11. s. Fill in the information below.		
11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?				
	✓ No ☐ Yes	s. Fill in the details.		
12.		1 year before you filed for bankruptcy, was any of your properrs, a court-appointed receiver, a custodian, or another official	•	
	✓ No ☐ Yes	8		
P	art 5:	List Certain Gifts and Contributions		
13.	Within	2 years before you filed for bankruptcy, did you give any gifts	with a total value of more than \$600 per person?	
	✓ No ☐ Yes	s. Fill in the details for each gift.		
14.		2 years before you filed for bankruptcy, did you give any gifts charity?	or contributions with a total value of more than \$600	
	✓ No □ Yes	s. Fill in the details for each gift or contribution.		
P	art 6:	List Certain Losses		
15.		1 year before you filed for bankruptcy or since you filed for ba lisaster, or gambling?	inkruptcy, did you lose anything because of theft, fire,	
	□ No ☑ Yes	s. Fill in the details.		

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Debtor 1 Ba		Barbara Ann S	Smith	Case number (if known)						
		ne property you lo curred	ost and how	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss April of 2019	Value of property lost \$2,000.00				
Debtor states that she hit a deer with her 2015 Kia Sorento in April of 2019.				Debtor has filed a claim with her insurance company, but will only recover money toward the repairs. As of the date of filing, the Debtor still has to get an estimate for the repair and pay her \$500.00 deductible.						
Pa	rt 7:	List Certain	Payments or	Transfers						
	anyon	e you consulted a	about seeking bar	ptcy, did you or anyone else acting on your behalf pay on hkruptcy or preparing a bankruptcy petition?		•				
			inkruptcy petition p	preparers, or credit counseling agencies for services require	d for your bankrupt	cy.				
	☐ No ✓ Ye	oes. Fill in the detail	s.							
	.C. Lav	W Was Paid		Description and value of any property transferred \$1250.00 Attorney Fees	Date payment or transfer was made	Amount of payment				
1296 Numb		sson Ferry Road	l	-	02/2020	\$1,250.00				
Suite				_						
St. L	ouis	MC	0 63128							
City		Star		-						
		oclaw.com site address		-						
				_						
		Made the Payment, if		ptcy, did you or anyone else acting on your behalf pay o	or transfer any nro	nerty to				
				vith your creditors or to make payments to your creditor		perty to				
	Do not	include any paym	ent or transfer that	you listed on line 16.						
	✓ No	o es. Fill in the detail	s.							
			_	uptcy, did you sell, trade, or otherwise transfer any prop se of your business or financial affairs?	perty to anyone, ot	her than				
		•		s made as security (such as granting of a security interest of nave already listed on this statement.	r mortgage on your	property).				
	✓ No	oes. Fill in the detail	s.							
				ruptcy, did you transfer any property to a self-settled tru called asset-protection devices.)	ust or similar devic	e of which				
	✓ No	_								

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Deb	tor 1	Barbara Ann Smith	Case number (if known)
P	art 8:	List Certain Financial Accounts, Instruments, Safe Depo	sit Boxes, and Storage Units
20.		year before you filed for bankruptcy, were any financial accounts or in closed, sold, moved, or transferred?	nstruments held in your name, or for your
		checking, savings, money market, or other financial accounts; certificates o pension funds, cooperatives, associations, and other financial institutions.	f deposit; shares in banks, credit unions, brokerage
	✓ No ☐ Yes	. Fill in the details.	
21.	-	now have, or did you have within 1 year before you filed for bankruptc rities, cash, or other valuables?	, any safe deposit box or other depository
	✓ No ☐ Yes	. Fill in the details.	
22.	-	ou stored property in a storage unit or place other than your home with	n 1 year before you filed for bankruptcy?
	✓ No ☐ Yes	. Fill in the details.	
P	art 9:	Identify Property You Hold or Control for Someone Else	
23.	-	hold or control any property that someone else owns? Include any pro in trust for someone.	perty you borrowed from, are storing for,
	✓ No ☐ Yes	. Fill in the details.	
P	art 10:	Give Details About Environmental Information	
For	the purp	ose of Part 10, the following definitions apply:	
ı	nazardou	nental law means any federal, state, or local statute or regulation concess or toxic substance, wastes, or material into the air, land, soil, surface statutes or regulations controlling the cleanup of these substances, w	water, groundwater, or other medium,
		ns any location, facility, or property as defined under any environmenta or used to own, operate, or utilize it, including disposal sites.	al law, whether you now own, operate, or
		<i>is material</i> means anything an environmental law defines as a hazardo e, hazardous material, pollutant, contaminant, or similar item.	us waste, hazardous substance, toxic
Rep	ort all no	otices, releases, and proceedings that you know about, regardless of w	hen they occurred.
24.	Has any law?	governmental unit notified you that you may be liable or potentially lia	ble under or in violation of an environmental
25.	_	. Fill in the details. ou notified any governmental unit of any release of hazardous material?	•
	_	. Fill in the details.	

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Debtor 1		Barbara Ann Smith		Case number (if known)		
26.	Have you	u been a party in any judicial or administrative proceeding under any environmental law? Include settlements and				
	☑ No □ Yes	. Fill in the details.				
P	art 11:	Give Details About Your Business	or Connections to An	y Business		
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?						
		A sole proprietor or self-employed in a trade, A member of a limited liability company (LLC A partner in a partnership An officer, director, or managing executive of An owner of at least 5% of the voting or equit) or limited liability partnershi a corporation			
		None of the above applies. Go to Part 12. Check all that apply above and fill in the detail.	ails below for each business.			
28.	Within 2		you give a financial stateme	ent to anyone about your business? Include		
	□ No □ Yes	. Fill in the details below.				
P	art 12:	Sign Below				
that pro	I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
X	s/ Barb	ara Ann Smith X				
l	Barbara A	nn Smith, Debtor 1	Signature of Debtor 2			
Date Date						
Did	you atta	ch additional pages to Your Statement of Fi	nancial Affairs for Individua	ls Filing for Bankruptcy (Official Form 107)?		
	No Yes					
Did	you pay	or agree to pay someone who is not an atto	orney to help you fill out ba	nkruptcy forms?		
		me of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).		

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Fill in this in	Fill in this information to identify your case:				
Debtor 1	Barbara First Name	Ann Middle Name	Smith Last Name		
Debtor 2	riist ivaffle	iviluale Name	Lasi Ivallie		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: EASTERN DISTRICT OF MISSOURI					
Case number (if known)					

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

 For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.

				.	
Identify the cre	ditor and the property that is collateral		at do you intend to do with the perty that secures a debt?		you claim the property exempt on Schedule C
Creditor's name:	Heights Finance Corp	\Box	Surrender the property. Retain the property and redeem it.		No Yes
Description of property securing debt:	Household Goods and Furnishings		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:		
Creditor's name:	Select Portfolio Servicing, Inc	I	Surrender the property. Retain the property and redeem it.		No Yes
Description of property securing debt:	2724 Skyline Drive, High Ridge, MO 63049		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:		
Creditor's name:	Trustee of Roads		Surrender the property. Retain the property and redeem it.		No Yes
Description of property securing debt:	2724 Skyline Drive, High Ridge, MO 63049		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:		

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Debtor 1	Barbara Ann Smith	Case n	number (if known)
Ident	ify the creditor and the property	that is collateral What do you intend to d property that secures a	
Crediname	Trono i ai go Douioi	Svc Surrender the proper	
	ription of 2015 Kia Sorento	Retain the property a Reaffirmation Agree	
prope secur	ing debt:	Retain the property a	
Part 2:	List Your Unexpired Po	rsonal Property Leases	
fill in the i yet ended	nformation below. Do not list re . You may assume an unexpired	al estate leases. <i>Unexpired leases</i> are leases the personal property lease if the trustee does not	assume it. 11 U.S.C. § 365(p)(2).
None	ribe your unexpired personal pr e.	perty leases	Will this lease be assumed?
Part 3:	Sign Below		
	penalty of perjury, I declare that al property that is subject to an	I have indicated my intention about any property unexpired lease.	y of my estate that secures a debt and
X /s/ Bar	rbara Ann Smith	X	
Barbara	a Ann Smith, Debtor 1	Signature of Debtor 2	
_	02/11/2020	Date	
1	MM / DD / YYYY	MM / DD / YYYY	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
,	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

-		filing fee administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

+		filing fee administrative fee	
-	\$310	total fee	

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Bankruptcy/Resources/ApprovedCreditAndDebtCounselors.aspx.}{}$

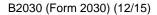
If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MISSOURI ST. LOUIS DIVISION

ın	re Barbara Ann Smith	Case No.	·
		Chapter	7
	DISCLOSURE OF COMPENSATION	N OF ATTORNEY FO	R DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I content that compensation paid to me within one year before the filing conservices rendered or to be rendered on behalf of the debtor(s) is as follows:	of the petition in bankruptcy, o	r agreed to be paid to me, for
	For legal services, I have agreed to accept		\$1,250.00
	Prior to the filing of this statement I have received		\$1,250.00
	Balance Due		\$0.00
2.	. The source of the compensation paid to me was: ☑ Debtor ☐ Other (specify)		
3.	. The source of compensation to be paid to me is:		
	✓ Debtor ☐ Other (specify)		
4.	 I have not agreed to share the above-disclosed compensa associates of my law firm. 	ntion with any other person un	less they are members and
	I have agreed to share the above-disclosed compensation associates of my law firm. A copy of the agreement, togeth compensation, is attached.		
5.	. In return for the above-disclosed fee, I have agreed to render le	egal service for all aspects of	the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering adbankruptcy;	vice to the debtor in determini	ing whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements	of affairs and plan which may	be required;
	c. Representation of the debtor at the meeting of creditors and	l confirmation hearing, and an	y adjourned hearings thereof;

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

02/11/2020 /s/ Randall T. Oettle

Date Randall T. Oettle Bar No. 46820

R.O.C. Law, Randall Oettle Company, P.C.

12964 Tesson Ferry, Suite B St. Louis, MO 63128

Phone: (314) 843-0220 / Fax: (314) 843-0048

/s/ Barbara Ann Smith

Barbara Ann Smith

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UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MISSOURI ST. LOUIS DIVISION

IN RE: Barbara Ann Smith CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

	The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her mowledge.					
Date 2	2/11/2020	Signature	/s/ Barbara Ann Smith			
		- g	Barbara Ann Smith			

CBCS P.O. Box 2724 Columbus, OH 43216

Comenity Bank/beallsfl Po Box 182789 Columbus, OH 43218

Credit One Bank Na Po Box 98872 Las Vegas, NV 89193

DDS Dentures + Implant Solutions 1708 Missouri State Road Arnold, MO 63010

Gateway Cardiology, P.C. PO Box 505036 St. Louis, MO 63160

Heights Finance Corp 7707 Knoxville Ave Peoria, IL 61615

Hometowne Capital P.O. Box 100201 Nashville, TN 37224

IRS P.O. Box 7346 Philadelphia, PA 19101-7346

Jefferson County Collector Collector of Revenue P.O. Box 100 Hillsboro, MO 63050 Missouri Department of Revenue P.O. Box 475301 West High Street Jefferson City, MO 65105-0475

Receivable Management Services, LLC P.O. Box 19646 Minneapolis, MN 55419

Select Portfolio Servicing, Inc P.O. Box 65450 Salt Lake City, UT 84165

The Hartford Hartford Plaza 690 Asylum Ave Hartford, CT 06115

Trustee of Roads

URMC Highland Hospital 1000 South Avenue Rochester, NY 14620

US Attorney's Office 111 South 10th Street Suite 3300 St. Louis, MO 63102

Wells Fargo Dealer Svc Po Box 10709 Raleigh, NC 27605

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F	ill in this inf	ormation to i	dentify your case	:		e box only as direc	
	ebtor 1	Barbara	Ann	Smith	form and	in Form 122A-1Su	pp:
	-2.0. 1	First Name	Middle Name	Last Name	1.There is	no presumption of abus	se.
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name	of abuse	ulation to determine if a applies will be made under est Calculation (Official	nder Chapter 7
Uı	nited States Ba	nkruptcy Court fo	or the: EASTERN DIS	TRICT OF MISSOURI		ns Test does not apply	
	ase number known)				of qualifi	ed military service but it	could apply
					Check if t	his is an amended filing	J
<u>Of</u>	ficial Form	122A-1					
Ch	napter 7 S	tatement o	f Your Current	Monthly Income			12/19
info are mili 122	ormation applic exempted fror itary service, c A-1Supp) with	es. On the top on a presumption omplete and file this form.	of any additional pages	heet to this form. Include the s, write your name and case ou do not have primarily contion from Presumption of Ab	number (if know) sumer debts or b	n). If you believe that y ecause of qualifying	you
_							
1.	What is your	marital and filin	g status? Check one	only.			
	✓ Not mar	ried. Fill out Col	umn A, lines 2-11.				
	Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.						
	☐ Married	and your spous	e is NOT filing with yo	ou. You and your spouse are	e :		
	Livi	ng in the same	household and are no	t legally separated. Fill out b	oth Columns A and	d B, lines 2-11.	
	dec	lare under penal	ty of perjury that you an	d. Fill out Column A, lines 2-17 d your spouse are legally sepasted that do not include evading the sepasted in the sepasted i	arated under nonb	ankruptcy law that appli	es or that you
	bankruptcy of August 31. If in the result.	the amount of your point include an	§ 101(10A). For exampur monthly income varue income amount more	ed from all sources, derived ole, if you are filing on Septem ied during the 6 months, add to the than once. For example, if be than onthing to report for any	ber 15, the 6-mon he income for all 6 oth spouses own t	th period would be Marc months and divide the he same rental property	ch 1 through total by 6. Fill
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	_	/ages, salary, ti /roll deductions).	os, bonuses, overtime	, and commissions	\$0.00		
3.	Alimony and if Column B is	•	ayments. Do not include	de payments from a spouse	\$0.00		
4.	expenses of regular contributions your depende	you or your depoutions from an units, parents, and	roommates. Include r		\$0.00		

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tor 1 Barbara Ann Smith			c	ase number (if k	nown)
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse
Net income from operating a busine	ess, profession, o	or farm			
	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	\$0.00		-		
Ordinary and necessary operating — expenses	\$0.00		-		
Net monthly income from a business, profession, or farm	\$0.00		Copy _ here →	\$0.00	
Net income from rental and other re	eal property				
	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	\$0.00		_		
Ordinary and necessary operating — expenses	\$0.00		- Copy		
Net monthly income from rental or other real property	\$0.00		here	\$0.00	
Interest, dividends, and royalties				\$0.00	
Unemployment compensation				\$0.00	
For your spouse Pension or retirement income. Do rwas a benefit under the Social Security Act.	not include any am	\$0		\$143.43	
next sentence, do not include any cor allowance paid by the United States C disability, combat-related injury or dis-	mpensation, pensions Sovernment in con	on, pay, annuity, c nection with a			
uniformed services. If you received a of title 10, then include that pay only t amount of retired pay to which you wo under any provision of title 10 other the	any retired pay paid to extent that it does ould otherwise be e	d under chapter 6° es not exceed the entitled if retired	1		

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Deb	tor 1 Barbara Ann Smith		Case number (if known)	
11	Calculate your total current monthly income.		Column A Column B Debtor 1 Debtor 2 or non-filing spouse	
•••	Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column.	mn B.	\$143.43 + Total curr monthly in	
P	Determine Whether the Means T	est Applies to You		
12.	Calculate your current monthly income for the ye	ear. Follow these steps:		
	12a. Copy your total current monthly income from I	line 11	Copy line 11 here > 12a	43.43
	Multiply by 12 (the number of months in a yea	ır).	X 12	2
	12b. The result is your annual income for this part	of the form.	12b. \$1,7 2	21.16
13.	Calculate the median family income that applies t	to you. Follow these steps:		
	Fill in the state in which you live.	Missouri		
	Fill in the number of people in your household.	1		
	Fill in the median family income for your state and si	ze of household	13. \$48,2 °	12.00
	To find a list of applicable median income amounts, instructions for this form. This list may also be available.		·	
14.	How do the lines compare?			
	14a. Line 12b is less than or equal to line 13. Go to Part 3. Do NOT fill out or file Offic		oox 1, There is no presumption of abuse.	
	14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	p of page 1, check box 2, The	presumption of abuse is determined by Form 122A-2	?.
P	art 3: Sign Below			
	By signing here, I declare under penalty of perjury	that the information on this sta	tement and in any attachments is true and correct.	
	χ /s/ Barbara Ann Smith	x		
	Barbara Ann Smith, Debtor 1	Signa	ature of Debtor 2	_
	Date <u>2/11/2020</u>	Date		
	MM / DD / YYYY		MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form	n 122A-2.		

If you checked line 14b, fill out Form 122A-2 and file it with this form.